

- Accepted
 Rejected
 Entered

MARYLAND DEPARTMENT OF THE ENVIRONMENT
Water Supply Program • Suite 450
1800 Washington Boulevard, Baltimore Maryland 21230-1708
Telephone (410)537-3706/Fax (410)537-3157

Surface Water / GWUDI Monthly Compliance Determination

PWS ID # _____ Public Water System Name _____ Mo/Yr _____
Plant # _____ Plant Name: _____
Begin Date: _____ End Date: _____ (enter if plant operated for part of the month)

Filtration type (95% turbidity limit / maximum turbidity limit)

- Conventional, Direct, or Alternative (0.3/1 NTU) D.E., cartridge, or slow sand (1/5 NTU) Other: _____

Filtration Treatment Performance

A. Combined Filter Effluent Turbidity Continuous turbidity monitoring? Yes No one reading every _____ minutes

(1) Number of turbidity readings required this month? _____ Number of turbidity readings taken? _____

Compliance with number of required turbidity readings? Yes No

(2) Number of readings that exceeded the maximum turbidity limit? _____ (see Filtration type above)

Highest Single Turbidity Reading _____ **NTU**

(3) Number of readings that exceeded 95% turbidity limit _____ (see Filtration type above)

% readings that exceeded 95% turbidity limit _____ %

Compliance with Treatment Technique for turbidity limit? Yes No

NOTE: If turbidity limits are exceeded or required samples are not collected, notify MDE as soon as possible.

Notification date (if applicable): _____

B. Individual Filter Effluent Turbidity Number of filters One Two Three or more

(1) Was each filter monitored continuously? Yes No (If "No", answer 2-7 based on combined filter readings.)

(2) Were measurements recorded every 15 minutes or more frequently? Yes No

(3) Was there a failure of continuously monitoring equipment? Yes No

(4) Was turbidity greater than 1.0 NTU in any two consecutive readings? Yes No

(5) Was turbidity greater than 0.5 NTU in two consecutive readings after on-line for more than 4 hours? Yes No

(6) Was turbidity greater than 1.0 NTU in two consecutive readings in three consecutive months? Yes No

(7) Was turbidity greater than 2.0 in two consecutive readings in two consecutive months? Yes No

NOTE: If the answer to question 2 in section B is "No", or the answer to any of questions 3, 4, 5, 6, or 7 in section B is "Yes",

notify MDE as soon as possible. Notification date (if applicable): _____

Superintendent's initials _____

SUBMIT THIS REPORT BY THE 10TH OF THE MONTH FOLLOWING THE REPORTING PERIOD.

SURFACE WATER/GWUDI FILTRATION PLANT MONTHLY OPERATING REPORT

Superintendent (Initials) _____

Mo/Yr _____

PWSID #: _____ Public Water System Name: _____

Plant Number and Name: _____

GENERAL			RAW WATER				CHEMICAL ADDITION													
Date	Rain (inches or Y/N)	Hours in Service	pH	Turbidity	Alk	Iron	Coagulant		Polymer		Lime		Fluoride		Other		Pre-Chlorine		Post-Chlorine	
				NTU	mg/L	mg/L	#/d	mg/L	#/d	mg/L	#/d	mg/L	#/d	mg/L	#/d	mg/L	#/d	mg/L	#/d	mg/L
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31																				
TOTAL																				
MIN																				
MAX																				
AVG.																				

Comments: _____

SURFACE WATER/GWUDI FILTRATION PLANT MONTHLY OPERATING REPORT

Superintendent (Initials) _____

Mo/Yr _____

WPSID # _____

SYSTEM NAME _____

PLANT NUMBER AND NAME: _____

Turbidity Readings From (Check one): Combined filter effluent turbidimeter individual filter(s) effluent (weighted average if > one filter) clear well effluent Other: _____

Date	Max Settled Turb NTU	pH	FINISHED WATER				FINISHED WATER TURBIDITY						DISTRIBUTION (any and all samples)			FLOW DATA			
			Total Alk. mg/L	Fluro. mg/L	Iron mg/L	Cl ₂ -Point of Entry		avg NTU	max NTU	Number of Readings Taken			CL ₂ Residual (mg/L)			Raw water MGD	Finished MGD Water	Backwash Water	
						Number of Readings	Minimum Residual mg/L			Total	≤0.3 NTU	>1 NTU	min	max	avg			MGD	% Total Flow
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Comments: _____

SURFACE WATER/GWUDI FILTRATION PLANT MONTHLY OPERATING REPORT

Superintendent (Initials) _____

Mo/Yr _____

PWSID # _____ Public Water System Name: _____ Plant Number and Name: _____

PERFORMANCE DATA

INDIVIDUAL FILTER TURBIDITY

continuous monitoring continuous monitoring and grab samples

Date	Filter No. 1	Filter No. 2	Filter No. 3	Filter No. 4	Filter No. 5	Filter No. 6	Filter No. 7	Filter No. 8	Filter No. 9	Filter No. 10	Filter No. 11	Filter No. 12	Filter No. 13	Filter No. 14
	Max turb (NTU)													
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Comments: _____